Introduced by Assembly Member Rodriguez

February 21, 2014

An act to add and repeal Section 1797.122 of the Health and Safety Code, relating to emergency medical services.

LEGISLATIVE COUNSEL'S DIGEST

AB 2406, as introduced, Rodriguez. Emergency Medical Services Authority: abuse of emergency medical services.

Existing law requires the Emergency Medical Services Authority to develop planning and implementation guidelines for emergency medical services (EMS) systems that address several components, including, but not limited to, manpower and training, communications, transportation, and assessment of hospitals and critical care centers.

This bill would require the authority no later than December 1, 2015, to report to the Legislature identifying programs that have been implemented in the state by local EMS agencies to address the misuse and abuse of emergency medical services. The bill would require the report to include a summary of the specified information on the various approaches applied to serve those frequent EMS user transports and any recommendations for the implementation of a statewide program to address the misuse and abuse of emergency medical services.

Vote: majority. Appropriation: no. Fiscal committee: yes. State-mandated local program: no.

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The people of the State of California do enact as follows:

1 SECTION 1. The Legislature finds and declares all of the 2 following:

- (a) Nonemergency calls are overloading the 911 system.
- (b) The most common nonemergency reasons given by transported people calling 911 requesting an ambulance include: "I didn't have a ride," "I though I might be seen more quickly by getting to an emergency room on an ambulance," "I needed a prescription refill," "It's a free ride," and "I am hungry and I know I will get a meal at the hospital."
- (c) Frequent users of emergency medical services, commonly referred to as ambulance "frequent flyers," are costing California cities millions of dollars. According to the EMS Medical Director of the County of San Diego Emergency Medical Services, for example, 1,136 frequent users utilized the emergency medical services (EMS) system at least six times in 2012 and generated more than \$20 million in ambulance and paramedic charges.
- SEC. 2. Section 1797.122 is added to the Health and Safety Code, to read:
- 1797.122. (a) The authority shall prepare and submit a report to the Legislature identifying programs that have been implemented in the state by local emergency medical services agencies to address the misuse and abuse of emergency medical services. The report shall include all of the following:
- (1) A summary of the different programs implemented by local emergency medical services agencies to address the misuse and abuse of emergency medical services, including specific information on the various approaches applied to serve those frequent EMS user transports, such as:
 - (A) Identification and prioritization.
- 30 (B) Medical assessments.
 - (C) Care management or comprehensive care.
- 32 (D) Ongoing support via home visits or telephone calls.
- 33 (E) Support to the patient and family by directing the patient
- and his or her family to available resources such as health insurance
- 35 coverage, access to primary care and mental health services,
- 36 transportation and other relevant social services.

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- (F) The financial impact of servicing frequent EMS user transports, including funding sources and the costs of providing these services.
 - (G) Best practices.

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- (H) Cost-saving measures to offset frequent EMS user transport expenses.
- (2) Any recommendations for the implementation of a statewide program to address the misuse and abuse of emergency medical services.
- 10 (b) The report shall be submitted to the Legislature no later than 11 December 1, 2015.
- 12 (c) (1) A report submitted pursuant to subdivision (a) shall be 13 submitted in compliance with Section 9795 of the Government 14 Code.
- 15 (2) Pursuant to Section 10231.5 of the Government Code, this section is repealed on January 1, 2019.